

DEVELOPMENTAL COUNSELING FORM

For use of this form see FM 22-100.

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: 5 USC 301, Departmental Regulations; 10 USC 3013, Secretary of the Army and E.O. 9397 (SSN)
PRINCIPAL PURPOSE: To assist leaders in conducting and recording counseling data pertaining to subordinates.
ROUTINE USES: For subordinate leader development IAW FM 22-100. Leaders should use this form as necessary.
DISCLOSURE: Disclosure is voluntary.

PART I - ADMINISTRATIVE DATA

Name (Last, First, MI) Adams, Derek	Rank / Grade SPC/E-4	Social Security No. 123-45-6789	Date of Counseling 9 Sep 02
Organization HHC, Your Unit, APO AE 09123		Name and Title of Counselor SGT Smith, Joseph / Squad Leader	

PART II - BACKGROUND INFORMATION

Purpose of Counseling: (Leader states the reason for the counseling, e.g. Performance/Professional or Event-Oriented counseling and includes the leaders facts and observations prior to the counseling):

You are being counseled in preparation for your recommendation for promotion board appearance and promotion. You are scheduled to appear at the board on 4 Nov 2002.

PART III - SUMMARY OF COUNSELING

Complete this section during or immediately subsequent to counseling.

Key Points of Discussion:

**Requirements for PRIMARY Zone of Consideration: 6 Months Time in Grade
34 Months Time in Service**

**Your Current Status: 4 Months Time in Grade
32 Months Time in Service**

o Study Material:

- o Review question subject area checklist*
- o Read selected Army Regulations and Field Manuals*
- o Drill questions and answers*

o Army Physical Fitness Test (APFT)

- o Current score is 260*
- o Personal target score is 270+*

o Weapon Qualification

- o Current score is 36 (Expert)*
- o Personal target score is 40*

o Chain of Command recommendation

o Mock Board

o Uniform inspection

- o Check for proper fit*
- o Ensure all awards, tabs, and unit insignia are correct and up-to-date*

OTHER INSTRUCTIONS

This form will be destroyed upon: reassignment (other than rehabilitative transfers), separation at ETS, or upon retirement. For separation requirements and notification of loss of benefits/consequences see local directives and AR 635-200.

Plan of Action: (Outlines actions that the subordinate will do after the counseling session to reach the agreed upon goal(s). The actions must be specific enough to modify or maintain the subordinate's behavior and include a specific time line for implementation and assessment (Part IV below):

- o Obtain a copy of the subject area check list from PSG by Monday, Sept 16th.*
- o Prepare and conduct a rigorous individual APFT program for 4 weeks*
- o Take a record APFT on 9 October 02.*
- o Go to unit range (September 23, 2002) to improve qualification score.*
- o Practice D&C with the platoon for the next two weeks.*
- o Build board appearance skills and control nervousness with Platoon mock board appearances each Thursday afternoon.*
- o Provide supervisor with the necessary information to complete the recommendation packet by 27 Sep 02.*
- o Bring in uniform on 27 Sep 02 so PSG can inspect it for proper fit and appearance.*
- o Monitor all news reports at least the last two weeks prior to the board.*

Session Closing: (The leader summarizes the key points of the session and checks if the subordinate understands the plan of action. The subordinate agrees/disagrees and provides remarks if appropriate):

Individual counseled: I agree / ~~disagree~~ with the information above

Individual counseled remarks:

Signature of Individual Counseled: Derek Adams Date: 9 Sep 02.

Leader Responsibilities: (Leader's responsibilities in implementing the plan of action):

Assist with study progress by answering questions that may arise. Schedule for an APFT with the Training NCO for 9 Oct 02. Inspect uniform prior to PSG's inspection. Coordinate with Training NCO to add to the Range list for 23 Sep 02. Coordinate with PSG for mock boards every Thursday until the date of the board. Submit the recommendation packet through the chain-of-command to Battalion prior to the deadline of 4 Oct 02.

Signature of Counselor: Joseph Smith Date: 9 Sep 02.

PART IV - ASSESSMENT OF THE PLAN OF ACTION

Assessment: (Did the plan of action achieve the desired results? This section is completed by both the leader and the individual counseled and provides useful information for follow-up counseling):

Counselor: _____ Individual Counseled: _____ Date of Assessment: _____.

Note: Both the counselor and the individual counseled should retain a record of the counseling.